



**NONCONFORMING USE PERMIT APPLICATION**  
Department of Planning and Economic Development  
Zoning Section  
1400 City Hall Annex  
25 West Fourth Street  
Saint Paul, MN 55102-1634  
(651) 266-6589

Zoning Office Use Only

File #: \_\_\_\_\_

Fee: \_\_\_\_\_

Tentative Hearing Date: \_\_\_\_\_

**APPLICANT**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Name of Owner (if different) \_\_\_\_\_

Contact Person (if different) \_\_\_\_\_ Phone \_\_\_\_\_

**PROPERTY  
LOCATION**

Address/Location \_\_\_\_\_

Legal Description \_\_\_\_\_

\_\_\_\_\_ Current Zoning \_\_\_\_\_

(attach additional sheet if necessary)

**TYPE OF PERMIT:** Application is hereby made for a Nonconforming Use Permit under provisions of Chapter 62, Section 109 of the Zoning Code:

- The permit is for: ☐ Change from one nonconforming use to another (para. c)  
☐ Re-establishment of a nonconforming use vacant for more than one year (para. e)  
☐ Establishment of legal nonconforming use status for use in existence at least 10 years (para. a)  
☐ Enlargement of a nonconforming use (para. d)

**SUPPORTING INFORMATION:** Supply the information that is applicable to your type of permit.

Present/Past Use \_\_\_\_\_

Proposed Use \_\_\_\_\_

Attach additional sheets if necessary

Attachments as required ☐ Site Plan

☐ Consent Petition

☐ Affidavit

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_ City Agent \_\_\_\_\_